

NOV 10 2005

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**admitted in NY only

FACSIMILE TRANSMITTAL FORM

FAX NUMBER:	(571) 273-8300
TRANSMITTED TO:	Central Fax
OF:	U.S. Patent and Trademark Office
FROM:	Ernest J. Beffel, Jr.
CLIENT/MATTER:	Application No. 09/865,120 (3COM 3422-1)
DATE:	10 November 2005

TOTAL NUMBER OF PAGES INCLUDING THIS COVER SHEET:	10
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ORIGINAL:	
<input checked="checked" type="checkbox"/>	WILL NOT FOLLOW
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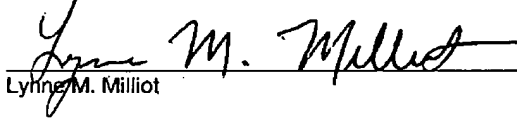
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Atty Docket No.: 3COM 3422-1

CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8
I hereby certify that this correspondence is being facsimile
transmitted to the United States Patent and Trademark Office
at Fax No. (571) 273-8300 on 10 November 2005.

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NOV 10 2005


Lynne M. Milliot

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Javad RAZAVILAR et al.

Application No.: 09/865,120

Confirmation No.: 3029

Filed: 24 May 2001

Title: **Method and Apparatus for Seamless
Mobility with Layer Two Assistance**

Group Art Unit: 3628

Examiner: David Robert Vincent

CUSTOMER NO.: 22470

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO NOTICE TO FILE CORRECTED APPLICATION PAPERS

Sir:

In response to the Notice to File Corrected Application Papers mailed 31 October 2005 stating that the oath/declaration is missing from the above-identified application, Applicants are resubmitting the Combined Declaration and Power of Attorney signed by inventors Javad Razavilar and Barani Subbiah on 21 March 2001, and originally filed with the Patent Office on 24 May 2001. Also resubmitted with this filing is a copy of the Transmittal Letter indicating that an oath/declaration was submitted at the time of filing, as well as a copy of the postcard confirming receipt by the Patent Office.

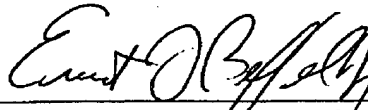
Application No.: 09/865,120

Atty Docket: 3COM 3422-1

Applicants believe that no fee is required with this submission. However, the Commissioner is authorized to charge any fees which may be required by this paper to Deposit Account No. 50-0869 (Attorney Docket No. 3COM 3422-1).

Respectfully submitted,

Dated: 10 November 2005



Ernest J. Beffel, Jr., Reg. No. 43,489

HAYNES BEFFEL & WOLFELD LLP
P.O. Box 366
Half Moon Bay, CA 94019
Telephone: (650) 712-0340
Facsimile: (650) 712-0263



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/865,120	05/24/2001	Javad Razavilar	3COM 3422-1	3029
22470	7590	10/31/2005	EXAMINER	
HAYNES BEFFEL & WOLFELD LLP P O BOX 366 HALF MOON BAY, CA 94019			VINCENT, DAVID ROBERT	
			ART UNIT	PAPER NUMBER
			3628	

DATE MAILED: 10/31/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

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HAYNES BEFFEL & WOLFELD LLP

NOV 04 2005

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PTO-90C (Rev. 10/03)



UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Serial Number
09865120

Date Mailed
10/31/05

NOTICE TO FILE CORRECTED APPLICATION PAPERS

Notice of Allowance Mailed

This application has been accorded an Allowance Date and is being prepared for issuance. The application, however, is incomplete for the reasons below.

Applicant is given 30 days from the mail date of this Notice within which to correct the informalities indicated below. A failure to reply will result in the application being ABANDONED. This period for reply is NOT extendable under 37 CFR 1.136 (a) or (b).

- The oath/declaration is missing.

APPLICANT MUST SUPPLY MISSING INFORMATION WITHIN 30 DAYS OF THE MAIL DATE OF THIS NOTICE.

A copy of this notice **MUST** be returned with the reply. Please address response to Commissioner for Patents P.O. Box 1450
Alexandria, VA 22313-1450

A handwritten signature in black ink, appearing to read "Rori Burch", written over a horizontal line.

Rori Burch
USPTO
Publishing Division
Fax (703) 746-6830
Fax (703) 308-6642
703-305-0333 ext.135 (V)

EXPRESS MAIL NO. EL48167512

COPY

Atty Docket: 3COM 3422-1

**COMBINED DECLARATION AND POWER OF ATTORNEY
FOR UTILITY PATENT APPLICATION**

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND APPARATUS FOR SEAMLESS MOBILITY WITH
LAYER TWO ASSISTANCE**

the specification of which

XX is attached hereto.
_____ was filed on _____ as Application No. _____
_____ and was amended on _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a) which states in relevant part: "Each individual associated with the filing and prosecution of a patent application has a duty of candor and good faith in dealing with the Office, which includes a duty to disclose to the Office all information known to that individual to be material to patentability as defined in this section....The duty to disclose all information known to be material to patentability is deemed to be satisfied if all information known to be material to patentability of any claim issued in a patent was cited by the Office or submitted to the Office in the manner prescribed by §§ 1.97(b)-(d) and 1.98."

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate as indicated below and have also identified below any foreign application for patent or inventor's certificate on this invention having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

(Number)	(Country)	(Day/Month/Year Filed)	Yes	No
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COPY

Atty Docket: 3COM 3422-1

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s), and under §119(e) of any United States provisional application(s), listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulation, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)

(Filing Date)

(Patented, Pending, Abandoned)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith, and to file, prosecute and to transact all business in connection with international applications directed to said invention:

Mark A. Haynes - Reg. No. 30,846
Ernest J. Beffel, Jr. - Reg. No. 43,489
James F. Hann - Reg. No. 29,719

Address all correspondence to:

CUSTOMER NO. 22470

Ernest J. Beffel, Jr.
Haynes & Beffel LLP
P.O. Box 366
Half Moon Bay, CA 94019

Direct all telephone calls to Ernest J. Beffel, Jr. at (650) 712-0340.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first joint

inventor, if any:

Javad Razavilar

Inventor's signature:

Javad Razavilar

Date:

3/21/01

Citizenship:

Iran

Residence:

12342 Salvia WaySan Diego, CA 92129

Post Office Address:

Same as above.

Page 2 of 3

COPY

Atty Docket: 3COM 3422-1

Full name of second joint
inventor, if any:

Barani Subbiah

Inventor's signature:

Date:

Citizenship:

Residence:

Post Office Address:

India

1665 Belleville Way, Apt. J

Sunnyvale, CA 94087

Same as above.

DATED: 24 May 2001

ATTY DOCKET: 3COM 3422-1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Box Patent Application
 Commissioner of Patents
 Washington, D.C. 20231
 Sir:

UTILITY PATENT APPLICATION TRANSMITTAL LETTER

Enclosed for filing is ☒ an original patent application or, ☐ a continuation-in-part patent application by JAVAD RAZAVILAR and BARANI SUBBIAH for METHOD AND APPARATUS FOR SEAMLESS MOBILITY WITH LAYER TWO ASSISTANCE.

Also enclosed are:

- ☒ 9 sheet(s) of ☐ formal ☒ informal drawing(s);
☒ 15 sheet(s) of specification/abstract;
☒ 16 sheet(s) of claims;
☐ a claim for foreign priority under 35 U.S.C. §§ 119 and/or 365 in
☐ a separate document ☐ the declaration;
☐ a certified copy of the priority document;
☒ Request and Certification Under 35 U.S.C. 122(b)(2)(B)(i).
☐ Applicant claims small entity status. See Rule 37 C.F.R. 1.27.
☒ an Assignment document and form PTO-1595;
☒ [] a declaration of the inventor(s); ☒ combined declaration and power of attorney.
☐ Disclosure Statement, PTO-Form 1449 and ___ references.
☒ Power of Attorney By Assignee

The fee has been calculated as follows:

CLAIMS					
	NO. OF CLAIMS		EXTRA CLAIMS	RATE	FEE
Basic Application Fee					\$710.00
Total Claims	171	MINUS 20 =	151	X \$18.00 =	\$2718.00
Independent Claims	5	MINUS 3 =	2	X \$80.00 =	\$160.00
If multiple dependent claims are presented, add \$270.00					-0-
Total Application Fee					\$ 3,588.00
If verified statement claiming small entity status is enclosed, subtract 50% of Total Application Fee					
Add Recording Fee of \$40.00 if Assignment document is enclosed					\$40.00
TOTAL APPLICATION FEE DUE					\$ 3,628.00

- ☒ Check No. 1234 in the amount of \$3,628.00 is enclosed.
☐ Charge \$_____ to Deposit Account No. 50-0869.
☐ Fees will be paid when responding to the Notice to File Missing Parts.
☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 50-0869 (3COM 3422-1). Two copies of this transmittal letter are enclosed.

Respectfully submitted,

Date: 24 May 2001

HAYNES & BEFFEL LLP
 P.O. Box 366
 Half Moon Bay, CA 94019
 (650) 712-0340 (phone)
 (650) 712-0263 (fax)


By: Ernest J. Beffel
 Ernest J. Beffel, L., Reg. No. 43,489

CUSTOMER NO. 22470

EL481675125US

COPY

COPY

Title: <u>Method and Apparatus for Seamless Mobility with Layer Two Assistance</u>	
Inventors/Applicant: <u>KAZAVILAR AND SUBBIAM</u>	
Application Serial No.: <u>Please Assign</u>	Filing Date: <u>24 MAY 2001</u>
Type Of Application: <input type="checkbox"/> Provisional <input checked="" type="checkbox"/> Original <input type="checkbox"/> CIP <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> CPA <input type="checkbox"/> PCT	
<input checked="" type="checkbox"/> Transmittal of Patent Application (in duplicate) <input checked="" type="checkbox"/> Specification and Abstract <u>15</u> pages <input checked="" type="checkbox"/> Claims <u>16</u> pages <input checked="" type="checkbox"/> Drawings (Informal) <u>9</u> pages <input type="checkbox"/> Missing Parts of Application Transmittal <input type="checkbox"/> Declaration/Oath <input checked="" type="checkbox"/> Combined Declaration/Power of Attorney <input type="checkbox"/> Power of Attorney <input checked="" type="checkbox"/> Power of Attorney by Assignee <input checked="" type="checkbox"/> Assignment/Form PTO 1595 <input type="checkbox"/> Small Entity Declaration <input type="checkbox"/> PCT International Application Request Form <u>3997 U.S. PTO</u> <input type="checkbox"/> Specification <u>09/865120</u> <input type="checkbox"/> Claims <input type="checkbox"/> Abstract <input type="checkbox"/> Drawings  <u>05/24/01</u>	<input type="checkbox"/> Fee Transmittal <input checked="" type="checkbox"/> Filing Fee \$ <u>710</u> <input checked="" type="checkbox"/> Claims in excess \$ <u>2718</u> <input checked="" type="checkbox"/> Independent claims in excess \$ <u>1160</u> <input checked="" type="checkbox"/> Surcharge \$ <u>40</u> <u>Assignment</u> <input type="checkbox"/> Extension of time (____ mo.) <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 with ____ references <input type="checkbox"/> Amendment/Response <input type="checkbox"/> Issue Fee <input type="checkbox"/> Formal Drawings
<input type="checkbox"/> Extension of time fee \$ _____ <input type="checkbox"/> Req-Corr Filing Receipt Fee \$ _____ <input type="checkbox"/> Issue fee/advance order \$ _____ <input type="checkbox"/> Other Fee \$ _____	<input type="checkbox"/> Chapter II Request/Fee Sheet <input type="checkbox"/> Response-Invitation to Correct <input type="checkbox"/> Article 34 <input type="checkbox"/> Article 19 <input type="checkbox"/> Response to Written Opinion
<input checked="" type="checkbox"/> Express Mail Certificate No. <u>EL431075125LK</u> <input type="checkbox"/> First Class Mail Check No. <u>1243</u> Enclosed For \$ <u>3678.00</u>	<input checked="" type="checkbox"/> Other: <u>Request for Non-Publication</u>
Attorney Docket No. <u>300M 3422-1L5</u> Attorney: <u>EOB</u>	Date Filed: <u>24 MAY 2001</u>

Please stamp and return this postcard to confirm receipt of the above